

APPLICATION FORM

INSTRUCTIONS: Complete this form, attach a resume, and e-mail them to the CFW@FrederickCountyMD.gov, or mail to Frederick County Commission For Women, 401 Sagner Avenue, Frederick, MD 21701. If a resume is unavailable, fill out the Applicant Background section below. Please print legibly.

APPLICANT INTEREST INFORMATION	ON:	
Check all that apply: Commission		
How many hours can you volunteer ea	ach month?	
f you selected Commissioner above, p	please answer the following:	
lave you served previously?	No	
yes, when did you last serve as Comi	missioner?	
Can you commit to a 3-year Commission	oner appointment? Yes	No
re you registered to vote in Frederick	County? Yes No	
nterest Areas: (check)		
Childcare	Healthcare	Mentoring
Domestic Violence	Housing	Pay Equity
Education	Transportation	Teen
Eldercare	Legislation & Policy	Other:
Statistical Analysis Marketing/Public Relations	Computer Skills Event Planning	Public Speaking Other:
Statistical Analysis	Computer Skills	Public Speaking
Social Media Management	Training	
CONTACT INFORMATION:		
Applicant's Name:		
Street Address:		
City / State: Phone (s):		Zip:
OCCUPATION INFORMATION:		
Occupation:		
Employer:		
Nork Address:		·
City / State:		_ Zip:

The Frederick County Commission For Women's mission is to create a stronger community by addressing challenges and fostering unlimited opportunities for all women.



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OTHER INFORMATION:
Are you an officer or director of, or engaged in, lobbying activity for any organization? Yes (Specify Organization): No
During the last 10 years, were you convicted of a crime other than a minor traffic offense? Yes No
If yes, explain in the space below. Do not include expunged, sealed or impounded conviction records. A conviction will not necessarily disqualify you, but may be considered as it relates to fitness and ability to perform a specific role. We will consider factors such as the date of the offense, the seriousness of the offense, and rehabilitation efforts.
BACKGROUND INFORMATION:
Academic Background:
Relevant Work Experience:
Organizational Affiliations:
By signing below, you are confirming the information above is accurate. For those applying to serve as an FCCFW Commissioner, signing also indicates you agree to serve up to a 3-year term as
appointed by the Frederick County Board of County Commissioners. Should you need to resign prior to fulfilling the appointed term, a sixty (60) day written notice is required.
Signature: Date:

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